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J1025 U.S. PTO

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JC973 U.S. PRO
09/90907

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Please type a plus sign (+) inside this box →

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

<i>Attorney Docket No.</i>	IN01156
<i>First Inventor</i>	ARASAPPAN
<i>Title</i>	NOVEL IMIDAZOLIDINONES AS NS3-SERINE PROTEASE INHIBITORS OF HEPATITIS C VIRUS
<i>Express Mail Label No.</i>	EL403237320US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

<input checked="" type="checkbox"/>	Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.
<input checked="" type="checkbox"/>	Specification <i>(preferred arrangement set forth below)</i>
<ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 	
<input type="checkbox"/>	Drawing(s) (35 U.S.C. 113) [Total Sheets] <input type="text"/>
4.	Oath or Declaration [Total Pages] <input type="text"/> 8
5.	a. <input checked="" type="checkbox"/> Newly executed (original or copy) <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) b. <input type="checkbox"/> <i>(for continuation/divisional with Box 18 completed)</i>
i.	<input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.	<input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (*Appendix*)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

a. Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. CD-ROM or CD-R (2 copies); or

ii. paper

c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of
(when there is an assignee) Attorney
11. English Translation Document (*if applicable*)
12. Information Disclosure Copies of IDS
Statement (IDS)/PTO-1449 Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.
17. Other: PATENT APPLN COVER SHEET

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: _____ Examiner: _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. An oath or declaration is not required if this application is filed simultaneously with an original application under 37 CFR 1.57(b). See 37 CFR 1.75(d) for more information.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	24265 <small>(Enter Customer Number/Attach Bar code/pba here)</small>	<input type="checkbox"/> or <input type="checkbox"/> Correspondence address below	
Name	PALAIYUR S. KALYANARAMAN (Reg. No.) 34,634		
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/Type)	Registration No. (Attorney/Agent)		34,634
Signature			Date
		July 19, 2001	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1196.00)

Complete if Known

Application Number	To Be Assigned
Filing Date	July 19, 2001
First Named Inventor	ARASAPPAN, et al
Examiner Name	To Be Assigned
Group Art Unit	To Be Assigned
Attorney Docket No.	IN01156

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 19-0365

Deposit Account Name Schering-Plough Corporation

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

 Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	\$710.00
106 320	206 160	Design filing fee	
107 490	207 245	Plant filing fee	
108 710	208 355	Reissue filing fee	
114 150	214 75	Provisional filing fee	
SUBTOTAL (1) (\$)			710.00

2. EXTRA CLAIM FEES

Total Claims	47	-20** =	27	x	\$18.00	=	\$486.00
Independent Claims	3	- 3** =	0	x	0	=	0
Multiple Dependent							

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 80	209 40	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		
\$ 486.00		

*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	
105 130	205 65	Surcharge - late filing fee or oath		
127 50	227 25	Surcharge - late provisional filing fee or cover sheet		
139 130	139 130	Non-English specification		
147 2,520	147 2,520	For filing a request for ex parte reexamination		
112 920*	112 920*	Requesting publication of SIR prior to Examiner action		
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action		
115 110	215 55	Extension for reply within first month		
116 390	216 195	Extension for reply within second month		
117 890	217 445	Extension for reply within third month		
118 1,390	218 695	Extension for reply within fourth month		
128 1,890	228 945	Extension for reply within fifth month		
119 310	219 155	Notice of Appeal		
120 310	220 155	Filing a brief in support of an appeal		
121 270	221 135	Request for oral hearing		
138 1,510	138 1,510	Petition to institute a public use proceeding		
140 110	240 55	Petition to revive - unavoidable		
141 1,240	241 620	Petition to revive - unintentional		
142 1,240	242 620	Utility issue fee (or reissue)		
143 440	243 220	Design issue fee		
144 600	244 300	Plant issue fee		
122 130	122 130	Petitions to the Commissioner		
123 50	123 50	Processing fee under 37 CFR 1.17(q)		
126 180	126 180	Submission of Information Disclosure Stmt		
581 40	581 40	Recording each patent assignment per property (times number of properties)		
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))		
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))		
179 710	279 355	Request for Continued Examination (RCE)		
169 900	169 900	Request for expedited examination of a design application		
Other fee (specify) _____				
*Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$)	

Complete if applicable

Name (Print/Type)	PALAIYUR S. KALYANARAMAN	Registration No. (Attorney/Agent)	34.634	Telephone	(908)298-5068
Signature		Date	July 19, 2001		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name

Signature

Date

Attorney Docket Number IN01156

PATENT APPLICATION COVER SHEET

**NOVEL IMIDAZOLIDINONES AS NS3-SERINE PROTEASE INHIBITORS OF
HEPATITIS C VIRUS**

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ASSIGNEE: SCHERING CORPORATION

PRIORITY APPLICATION: PROVISIONAL APPLICATION NO. 60/220,110
dated July 21, 2000

“Express Mail” Label No. EL403237320US

Date of Deposit: July 19, 2001

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